

Clearview Youth Football & Cheerleading

P.O. Box 564, Mullica Hill, NJ 08062

www.cyfcioneers.org

2010 Season Coach Application

I. Personal Data (All fields must be filled out and all questions answered completely.)

* Enter your Legal First Name:

* Enter your Legal Last Name:

* Street Address:

* City: * State * Zip

* Home Phone: Mobile Phone:

Work Phone: Employer:

* E-mail(s):

* Select One:

FOOTBALL	CHEERLEADING
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* 1st Choice Position: ← Head Coach or Assistant

* 1st Choice Division: ← (Which Team?)

Do you have children participating with CYFC in 2010? **YES OR NO?**
If yes, please provide their names and which teams they will be playing on?

II. Experience

Please list all experience as a Youth **Head Coach**:
(Yr, Level, Organization, League)

Please list all experience as a Youth **Assistant Coach**:
(Yr, Level, Organization, League)

Please list other important experiences/training:

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All CYFC board members, coaches and volunteers are required to participate in a background check at their own expense every two years. Checks are completed by the National Center for Safety Initiatives (www.ncsisafe.com). Information about the background checks can be ascertained from the CYFC Board. Have you already submitted to the background check described?

YES or NO Year Certified: _____

Have you ever been refused participation in any other youth sports program? YES or NO.

If yes, please
explain _____

All CYFC board members and coaches are asked to attend regular monthly scheduled meetings which include the offseason. If selected, will you be able to commit to attending these meetings regularly?

YES or NO

If NO, please explain _____

If accepted to a CYFC Coaching position, you will be required to attend all games unless extenuating circumstances apply. At which time you must notify the Director of Football or Cheerleading of your absence and make other arrangements to have your position covered.

Please initial here if you agree to these terms _____

Please list 2 References related to the position applying for (Include phone Numbers)

1) _____

2) _____

* Are you willing to participate as a volunteer at fundraisers, administration, special focus groups, various committees, etc.?

y or n

I understand that my volunteer position with CYFC is contingent upon my truthful completion and CYFC review and approval of this form. I authorize and understand that CYFC may obtain a criminal history report that is only visible to the CYFC Board. I understand that I may be immediately discharged for any misrepresentation or material omission on this form. I understand that any pending arrest or closed arrest is not an automatic bar to consideration of my application, but it is the intent of CYFC to deny a position to any person who has been convicted of sexual abuse, physical abuse, or exploitation of a minor. I also understand that I will be expected to follow all rules and regulations as set forth by the CYFC Executive Board and TCMFL, and that failure to comply with all rules can result in my immediate termination as a volunteer coach.

(Signature)

(Date)